

1. NUMBER: FD43-01-001	2. PCN: PB20251	MSFC ENGINEERING CHANGE REQUEST (ECR) (See Instructions - MSFC Form 2327-2)		3. DATE: January 23, 2001	4. PAGE 1 of 1
5. TO: Barbara Cobb/NPOCB		6. THRU:		7. FROM: FD43/Nelda Hiley	
8. TITLE OF CHANGE: Change DCPCG Ground Data Service Data Sets Requirements for Increments 3 and 4					
9. RECOMMENDED PRIORITY: <input type="checkbox"/> Emergency <input checked="" type="checkbox"/> Urgent <input type="checkbox"/> Routine			10. NEED DATE: ASAP		
11. PROGRAM(S)/PROJECT(S) AFFECTED: ISS			12. CONFIGURATION ITEM(S) AFFECTED BY NOMENCLATURE:		
13. RECOMMENDED EFFECTIVITY(IES):			14. DOCUMENTATION AFFECTED (Specs, ICD, etc.): Increments 3 and 4 Ground Data Services data sets, PRD, and NPRD		
15. RELATED CHANGES (ECR, ECP, CR, etc.) BY NUMBER: FD43-99-002, FD43-00-014, FD43-00-019, FD43-00-021			15A. INITIATING DOCUMENT NUMBER, e.g., DR, Software Trouble Report, etc.		
16. JUSTIFICATION FOR CHANGE (Include effect if not incorporated). (If necessary, continue on MSFC Form 2327-1 -Continuation Sheet) Document changes to Dynamically Controlled Protein Crystal Growth (DCPCG) requirements for Increments 3 and 4. Delete unnecessary science APID and add Ground Support Equipment (GSE) APID for University of Alabama in Birmingham (UAB) and MSFC TSC to receive correct data.					
17. EFFECTS ON: <input type="checkbox"/> Hardware <input type="checkbox"/> Facility <input type="checkbox"/> Schedule (See Enclosure for impact) <input type="checkbox"/> Requirements Documentation <input type="checkbox"/> Software <input type="checkbox"/> Environment <input type="checkbox"/> Cost (Estimated cost included in Enclosure) <input type="checkbox"/> Other (Specify):					
18. DESCRIPTION OF CHANGE (Include reference to enclosures). (If necessary, continue on MSFC Form 2327-1-Continuation Sheet) 1) Delete Payload Generated Science and/or Engineering data APID 917 from data requirements at UAB and MSFC . 2) Add GSE packet APID 428, data rate of 56 kbps, for UAB location. 3) Add GSE packet APID 429, data rate of 56 kbps, for MSFC TSC location.					
19. MOD KIT INFORMATION:					
Yes No				Enclosure	Paragraph
<input type="checkbox"/> <input checked="" type="checkbox"/> Previously issued modification instructions affected? (Explain)					
<input type="checkbox"/> <input checked="" type="checkbox"/> Proofing of modification instructions and kit installation required? (Explain)					
Proofing Location:					
<input type="checkbox"/> <input checked="" type="checkbox"/> Retest required? (Identify test invalidated by change)					
<input type="checkbox"/> <input checked="" type="checkbox"/> Requalification required? (Include description of test plan for requalification)					
Vehicle/Site & CI Serial No.	Change Period	Mod Kit Delivery Date	Est. M/H for Mod Kit Instl.	Out-of-Service Time	
20. SIGNATURE OF ORIGINATOR: Nelda Hiley /s/		DATE: January 23, 2001	TELEPHONE NUMBER: 544-5774	OFFICE SYMBOL: FD43	
21. CONCURRENCE					
SIGNATURE	ORG.	DATE	SIGNATURE	ORG.	DATE
22. TECHNICAL APPROVAL					
SIGNATURE	ORG.	DATE	SIGNATURE	ORG.	DATE